

(TO BE PUBLISHED IN PART IV OF THE DELHI GAZETTE EXTRAORDINARY)
GOVERNMENT OF NATIONAL CAPITAL TERRITORY OF DELHI
DEPARTMENT OF TRADE & TAXES
VYAPAR BHAWAN: I.P.ESTATE: NEW DELHI -110 002

No.F.3(352)/Policy/VAT/2013/585-596

Dated:15-12-2014

NOTIFICATION

Whereas, it is mandatory for all registered dealers to inform the Commissioner about any change effected in the registration particulars.

2. Therefore, I, Sanjeev Khirwar, Commissioner, Value Added Tax, Government of National Capital Territory of Delhi, without prejudice to legal provisions under DVAT Act, 2004 and DVAT Rules, 2005, consider it necessary that the dealer profile of all the registered dealers should be updated.

3. Now, therefore, in exercise of the powers conferred on me by sub-section(1) read with sub section(2) and (3) of section 70 and sub section (2) of section 59 of the said Act, I direct that the registered dealers who have not filed information in Form DP-1 till date, shall file information online in Form DP-1. The dealers who have filed the information already can also update the information through edit facility and attach scanned copy of the signature sheet after getting it duly signed.

4. The information so filed/updated shall be treated as request for amendment in the registration particulars at par with Application in Form DVAT-07/Form 11 and would be accepted as such. However, the dealers who have changed the constitution of their business shall file hard copy of the acknowledgement, generated at the time of submission of DP-1 form online, alongwith supporting legal document(s) in the ward concerned. Other dealers shall keep the acknowledgment with them for further reference.

5. On filling up/editing Form DP-1, a signature sheet of signatories/authorised signatories should be printed from the web site by clicking on "download signature sheet". After getting the sheet duly signed, scanned copy of the same shall be uploaded in pdf by clicking on "upload signature sheet". Thereafter, the complete Form DP-1 shall be submitted by clicking on "submit" button.

1. The filing/updating process shall commence from the date of issuance of this notification and shall continue upto 31st March, 2015.

2. Copy of Form DP-1 is annexed with the notification.

3. The notification comes into force with immediate effect.

(Sanjeev Khirwar)
Commissioner, Value Added Tax

No.F.3(352)Policy/VAT/2013/585-596

Dated: 15-12-2014

Copy forwarded for information and necessary action to:

1. The Principal Secretary to Lt.Governor, Raj Niwas, Delhi.
2. The Principal Secretary (GAD), Govt. of NCT of Delhi, Delhi Sachivalaya. New Delhi one spare copy for publication in Delhi Gazette Part-IV(extraordinary) in today's date.
3. The Principal Secretary (Finance),Finance Department, Govt. of NCT of Delhi, Delhi Sachivalaya, New Delhi-02.
4. All Special/Addl./Joint Commissioners, Department of Trade & Taxes, Vyapar Bhawan, I.P.Estate, New Delhi.
5. The Addl.Commissioner (PR), Department of Trade & Taxes, Vyapar Bhawan,, I.P.Estate, New Delhi to arrange to give wide publicity to this notification.

6. The Programmer(EDP), Department of Trade & Taxes, Vyapar Bhawan, I.P.Estate, New Delhi to upload the Notification on the website of the Department.
7. The Deputy Director (Policy), Department of Trade & Taxes, Vyapar Bhawan, I.P.Estate, New Delhi.
8. All Asstt.Commissioners/AVATOs Department of Trade & Taxes, Vyapar Bhawan, I.P.Estate, New Delhi through their Zonal Incharge.
9. The Registrar, VAT Appellate Tribunal, Department of Trade & Taxes, Vyapar Bhawan, I.P.Estate, New Delhi.
10. The President/Secretary,Sales Tax Bar Association (Regd.), Vyapar Bhawan, I.P.Estate, New Delhi
11. P.S to the Commissioner, Department of Trade & Taxes, Department of Trade & Taxes, Vyapar Bhawan, I.P.Estate, New Delhi.
12. Guard File.

(Sushita Biju)
Assistant Commissioner (Policy)

Department of Trade and Taxes
Government of NCT of Delhi

DP-1
PART - A
Registration Details

1. TIN	
2. Full Name of Applicant Dealer (Business Name)	
2A. Trade name, if any (other than Business Name)	
3. Zone/Ward (Existing).	
4. Zone/Ward (As per physical location of Principal place of business):	
5. Whether having TAN	<input type="checkbox"/> Yes <input type="checkbox"/> No
(i) If Yes, TAN	
6. Nature of Business (check more than one, if applicable)	
	<input type="checkbox"/> Manufacturer <input type="checkbox"/> Wholesale Trader <input type="checkbox"/> Retail Trader <input type="checkbox"/> Right to Use/ Lease <input type="checkbox"/> Works Contractor <input type="checkbox"/> Ex-porter <input type="checkbox"/> Importer <input type="checkbox"/> Others (specify) _____
	<input type="checkbox"/> Inter-state Seller <input type="checkbox"/> Inter-state Purchaser
7. . Constitution of Business	
<input type="checkbox"/> Proprietorship <input type="checkbox"/> Private Ltd. Company <input type="checkbox"/> Public Sector Undertaking <input type="checkbox"/> Partnership <input type="checkbox"/> Government Company/Deptt. <input type="checkbox"/> Government Corporation <input type="checkbox"/> HUF <input type="checkbox"/> Public Ltd. Company <input type="checkbox"/> Government Department <input type="checkbox"/> Society <input type="checkbox"/> Club <input type="checkbox"/> Trust <input type="checkbox"/> Others, please specify _____	
8. Permanent Account Number of the applicant dealer (PAN)	
i). Whether name of Applicant Dealer (as provided in item 2 above) is different from the 'Name Appearing on PAN Card'	<input type="checkbox"/> Yes <input type="checkbox"/> No
ii). If Yes, Name appearing on PAN Card	
9. Whether Registered under Central Excise Act	
<input type="checkbox"/> Yes <input type="checkbox"/> No	
9(a). If yes, Registration Number under Central Excise Act	
10. Whether Registered under Service Tax	
<input type="checkbox"/> Yes <input type="checkbox"/> No	
(i). If yes, Registration Number under Service Tax	

11. Whether Registered for IEC Yes No
 (i). If yes, IEC Code

12. Address of Principal Place of Business (To be used for service of physical notice, if any.)	Building Name/Number																		
	Floor																		
	Area/ Road																		
	Locality/Market																		
	City																		
	District																		
	State																		
	Pin Code																		
	Email Id																		
	Telephone Number																		
	Mobile Number																		
	Fax Number																		
	Area in Sq. Mts (Open)																		
Area in Sq. Mts (Covered)																			

13. Number of additional places of business within or outside Delhi		Within Delhi	Outside Delhi
	Godown / Warehouse		
	Factory		
	Shop		
	Accounts Office		
	Corporate Office		
	Other place(s) of business		

14. Description of top 5 items you deal or propose to deal in (1-highest volume to 5-lowest volume)	Description of items	Commodity Code				
	1					
	2					
	3					
	4					
	5					

15. List of Commodities dealt in inter-state business

Sl.No.	Type of Transaction (sale/purchase)	Name of Commodity	Code	Purpose
1	2	3	4	5

16.. Details of all Bank Accounts	Name of Bank	Account Number	IFSC Code	Address of Bank
	1.			
	2.			
	3.			
	4.			
	5.			

17. Number of persons having interest in business (also please complete Part B for each such person)			

18. Details of Managers (if proprietor/partner/director are acting as manager, their names should be mentioned here.

A. Name of Manager		B.Date of Birth															
C.Father's Name	.																
D.Aadhaar/UID																	
E.Address																	
F. PAN																	

19. Name of Authorized Signatory Please complete Part D																	
	First Name					Middle Name					Surname						

20. Counsel details

A. Counsel Name																	
	First Name					Middle Name					Surname						
B. Counsel Mobile Number																	
C. Counsel Email ID																	
D. Status - Advocate/CA/STP																	

12. Whether having interest in other firm/ company registered under DVAT Act .	<input type="checkbox"/> Yes		<input type="checkbox"/> No	
I.Name				
II.Address				
(a)Building Name/Number				
(b) Area/Road				
(c) Locality/Market				
(d) City				
(e) District				
(f) State				
(g)Pincode				
(h) e-mail				
(i)Telephone/Mobile No.				
(j) Fax Number				
III. TIN				
IV. Status				
Registration Status				

Form DP-1

PART-C

Details of Additional Places of Business

In case of multiple branches in a state other than Delhi, details of the principal place of business in that state are required to be furnished.

1. Full Name of Applicant Dealer																				
2. TIN																				
3. Place of Business																				
4. Nature of use																				

Type	<input type="checkbox"/> Godown / Warehouse	<input type="checkbox"/> Factory	<input type="checkbox"/> Shop	<input type="checkbox"/> Corporate office	<input type="checkbox"/> Accounts Office	<input type="checkbox"/> Other place of business
Address						
(a) Building Name/ Number						
(b) Floor						
(c) Area/ Road						
(d) Locality/ Market						

(e) Distt.																				
(f) State																				
(g) Pin Code																				
(h) Email Id																				
(i) Mobile Number																				
(j) Telephone Number																				
(k) Fax Number																				
5. Area in Sq. Mts (Open)	<input style="width: 100%;" type="text"/>																			
6. Area in Sq. Mts (Covered)	<input style="width: 100%;" type="text"/>																			
7. Date of establishment			/			/														
	Day			Month			Year													

8. Whether place of business is situated outside Delhi	<input type="checkbox"/> Yes <input type="checkbox"/> No
A. State local sales tax/ VAT/CST Registration Number (if place of business is situated outside Delhi)	
9. Ward	
10. Whether any other firm functioning from same premises	<input type="checkbox"/> Yes <input type="checkbox"/> No
A. TIN	
B. Ward	

12. Whether having interest in other firm/company, <input type="checkbox"/> Yes <input type="checkbox"/> No registered in Delhi or outside Delhi													
(i) Name of firm/company													
(ii) Address of firm/company													
(iii) TIN													
(iv) Status in that Firm/Company													
(v) Registration Status (Regd /Cancelled)													

Signature Sheet

TIN:

Date:

Name:

1.

2.

3.

4.

Address:

